

EXHIBIT 24



U.S. Department of Justice
Federal Bureau of Prisons
Health Services Division

Washington, D.C. 20534

February 29, 2020

**MEMORANDUM FOR ALL CLINICAL DIRECTORS
ALL HEALTH SERVICES ADMINISTRATORS
ALL QUALITY IMPROVEMENT/INFECTION PREVENTION
COORDINATORS**

Jeffery D. Allen, M.D.

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Date: 2020.02.29 11:23:25 -05'00'

FROM: Jeffery D. Allen, M.D., Medical Director
Health Services Division

SUBJECT: Guidance Update for Coronavirus Disease 2019
(COVID-19)

This memorandum serves to update the Bureau of Prisons' guidance related to Coronavirus Disease 2019 (COVID-19), previously referred to as the 2019 Novel Coronavirus Infection (2019-nCoV) and described in memos dated January 31, 2020. This change in nomenclature aligns with the new World Health Organization and Centers for Disease Control and Prevention (CDC) terminology. Of note, the virus that causes COVID-19 is now referred to as SARS-CoV-2.

COVID-19 now demonstrates person-to-person spread and is occurring in a growing number of locations outside of China, including the U.S. The vast majority of U.S. cases to date have been travel-related, with only three cases of person-to-person transmission known to have occurred within the U.S. However, the situation is evolving rapidly; several additional cases of suspected community transmission have been reported in the last 24 hours. Although the risk of transmission in the U.S. is still considered low, current global circumstances suggest that the virus is likely to cause a pandemic. In response, BOP institutions need to continue screening for COVID-19 risk factors and symptoms and be prepared for a possible pandemic and managing a case of COVID-19 in either staff or inmates.

In addition to the guidance provided in the previous memos, the BOP recommends the following.

1. Perform COVID-19 screening of all new inmate admissions to the BOP early during the intake screening process.

- a. The inmate screening tool has been modified to incorporate new guidance from the CDC to assist in efficiently accomplishing this task. If used, institutions should replace prior versions of the screening tool with this current version (attached).
- b. Separate out and place a regular surgical mask on any inmate arriving to an institution with symptoms of acute respiratory illness. Having a supply of these masks and other personal protective equipment (PPE) readily available in the screening area is recommended.
- c. Have a means available in R&D for inmates to accomplish hand hygiene / washing upon arrival.

2. Educate staff about COVID-19 and screen staff with potential risk factors in accordance with the revised staff screening tool (attached).
3. Assure fit-testing for use of the N-95 respirator mask is being conducted at institutions. A current list of fit-tested personnel should be established and maintained in Ops Planner.
4. Disseminate education and provide demonstrations on appropriate procedures for donning and doffing of PPE.
5. Establish communication with local public health authorities for reporting and management procedures, to include a determination of where to send, suspected COVID-19 cases, Persons Under Investigation (PUIs) or quarantined inmates who develop signs or symptoms of illness.
6. Utilize the Pandemic Influenza Plan to initiate preparations for a potential COVID-19 pandemic.
 - a. Meet with executive staff leadership to determine where persons with COVID-19 risk factors would be quarantined in the facility, if needed.
 - b. Establish baseline PPE supplies for gloves, surgical masks, N-95 respirator masks, face shields and gowns. Each institution should develop a current list of PPE supplies and maintain an accurate inventory in Ops Planner. Institutions should also move to purchase additional supplies, as necessary.
 - c. Post a visitor notice alerting people with illness (fever, sore throat, cough, shortness of breath) not to visit. English and Spanish versions are attached.
 - d. Initiate means for inmates to wash hands after arriving to R&D, prior to fingerprinting or other procedures.

The following items have been updated or added to align with CDC guidance or definitions and to assist institutions to prepare for potential COVID-19 suspects or illness. Please note the

first two items are available on the Health Services Division Infectious Disease Sallyport page.

- 2019 Novel Coronavirus (COVID-19) Inmate Screening Tool
- 2019 Novel Coronavirus (COVID-19) Staff Screening Tool
- CDC COVID-19 education flyers (3)
- Visitor notifications signs (2)
- OSHA Respiratory Protection Program Toolkit, available at <https://www.osha.gov/Publications/OSHA3767.pdf>

Notify appropriate Regional and Central Office QIIPC Consultants, Supervisory Occupational Medicine Physician or Chief, Occupational Safety and Health Branch, as indicated on the screening tools, of any inmates or staff identified with exposure risk factors, with or without symptoms. They are also a good point of contact for questions you may have regarding this issue.

Please share this memorandum and associated attachments with Executive Staff at your location. These resources and screening tools will be posted and available on the HSD Sallyport web page.

Attachments (7)

cc: Assistant Directors
Regional Directors
Chris A. Bina, Sr. Deputy Assistant Director, HSD
Sheila Kiernan, Sr. Deputy Assistant Director, HRMD
Christopher Wade, Chief, Labor Relations
BOP-HSD/Executive Assistant
HSD Branch Chiefs / Chief Professional Officers
Regional Medical Directors
Regional Health Services Administrators